

# BolivianExpress

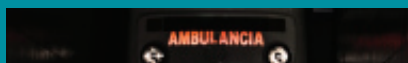
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‘G’et some urine—your own urine—soak a cloth in it, and put it on the back of your head. It will soak up all the swelling’. Wherever you turn in Bolivia, people seem to be brimming with medical advice for almost every ailment, be it physical or spiritual. It seems befitting that La Paz sits on what in Incan times was known as the Kollasuyo, the ‘land of medicine’. In this issue, we explore some of the different forms adopted by local healing practices.

There’s no single custom known as ‘traditional medicine’, though perhaps the most prominent local representatives are Kallawayas, indigenous to the village of Curva. We meet several of these medicine men to learn about their past, present, and future (see p.18 and 25), and take a look at how this approach to healing is even used to treat mental illness (see p.10). Such is their enduring popularity that even the government are trying to make their services available as part of the public healthcare system (see p.6). Yet local medicine is also practiced by women healers, and even shows a sign of the exotic, such as those found in a Doña Natalia’s storage room in the Witches’ Market: ‘dried starfish, ostrich feathers and eggs, a stuffed cat, dried glittery frogs, sea urchins, coloured mushrooms, shells and coral, bones and numerous herbs drying in the shade’ (see p.24). We also meet an expert fracture healer, Doña Andrea, who, using lizard and snake patches, has been healing broken bones for decades.

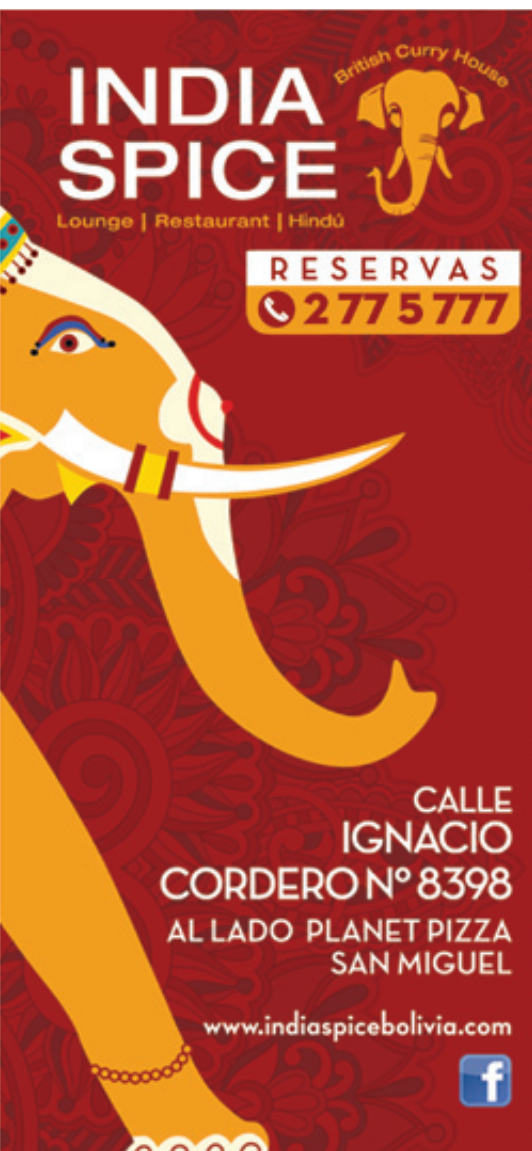
Many of today’s maladies often call to be treated through unconventional means. Spiritual healers increasingly turn to powerful hallucinogens (see p.20) to tackle deep-seated traumas and even the odd midlife crisis. Or take the promise from evangelical preachers that God and faith can miraculously cure the most extreme of medical illnesses (see p.14), all of which evaporate in a frenzied spasm (usually provided the appropriate donation is given)

Foreign medical practices are also finding their place within Bolivian society. Homeopathy (see p.22) is gaining adherents due to its holistic understanding of illness and increasing availability. Plastic surgery’s double-edged scalpel (see p.26) helps people with accidents and disfigurements feel more comfortable in their own skin, but some fear that through its merciless marketing, it often shapes conceptions of beauty as much as it shapes bodies and faces.

On our front and back covers we’ve tried to bring into focus what it means to live in a country where seemingly irreconcilable medical approaches can be used by a single patient. Bolivians are certainly not lacking in choice when it comes to healing. ✕

**N.B.** Several Spanish and Aymara words are marked in **bold** throughout this issue. Their meanings can be found in our glossary

By Amaru Villanueva Rance




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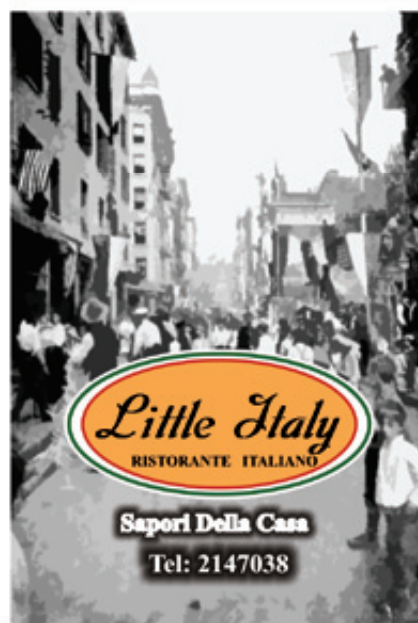


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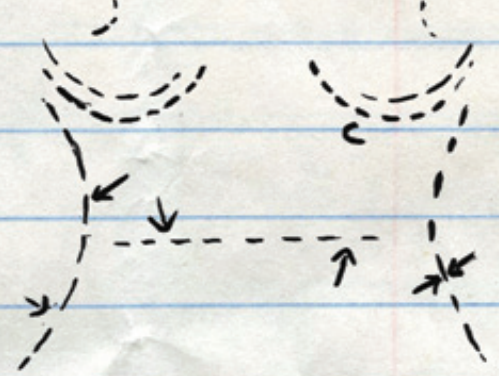
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ALTIPLANO	The Andean high plateau extending through the western region of Bolivia		
CAMPESINOS	Farmers		
CH'ALLA	Traditional ritual to bless a place		
CHIFLERA	Women who sell medicinal herbs		
CHOLA	Indigenous woman in traditional dress and bowler hat		
CHOLITA	Affectionate diminutive for chola		
FARMACIA	Pharmacy	POLLERAS	Long, flowing skirts, sometimes embroidered, worn by cholitas
KALLAWAYA	Traditional healer	PUERTITA	Little door
PACEÑO(A)	Of or relating to the city of La Paz	TOMA	Take
PARCHE NATURAL	A natural herb paste	UÑA DE GATO	Woody vine found in the jungle used to cure diseases such as cancer
		YATIRI	Traditional healer

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TEXT: ROB NOYES

PHOTO: IVAN RODRIGUEZ PETKOVIC



# A HEALING CONUNDRUM

THE GOVERNMENT CLAIMS TRADITIONAL MEDICINE IS PREDOMINANT IN BOLIVIA WHILE A RESEARCH INSTITUTE DENOUNCES THE ERADICATION OF THESE PRACTICES. ROBERT NOYES SETS OUT TO WEIGH UP THE EVIDENCE.

**T**he field of medicinal practices in Bolivia seems to have turned into a contested political battleground. On the one hand, people like Sr. Alberto Camaqui Mendoza, who is the Vice Minister of Traditional Medicine, advocate that 'Traditional Medicine is the first step in the healing process for all Bolivians.' On the other, experts at the research institute for Traditional Medicine, INBOMETRAKA, dismiss this claim as 'a myth of propaganda'. Which side of this debate is more accurate? Is traditional medicine undergoing a resurgence? Or is it only used by the hopeless, those with chronic illnesses desperate for a cure?

Hidden away in the confines of the

National Lottery building, Vice Minister Mendoza sat in his office chair with a sharp cowboy hat perfectly balanced on his head. He was a hard man to find. After being directed to and fro by various vice ministries, I eventually tracked him down in a small office perched on the Prado.

Sr. Mendoza explained in detail the popularity of traditional medicine in Bolivia and the reasons behind this popularity. 'It's in the family,' he told me. Aymara people view illness more as a disturbance in their relationship with the Earth, than as a disturbance in the functioning of their body. Bolivian culture, he insisted, is different to mine. Here, people don't trust in modern medicine as much as they trust

in their traditional practices.

Eager to test out this claim, I headed over to El Alto to talk with the people of INBOMETRAKA, an organization solely dedicated to the study of traditional healing practices practised by **Kallawayas**. Kallawayas are an itinerant group of healers prominent in Bolivia. Founded in 1987 with the aims of gathering the knowledge of Kallawayas and of producing scientific literature about traditional medicine the institute has been growing in recent years. In 2003, in part due to the work of the institute, UNESCO officially recognised traditional medicinal practice as a viable healing method.

Up three staircases on a side street near the market in El Alto lay the unassuming offices of the institute. Dr. Carmen Beatriz Loza, the director of research at the institution, offered her apologies – chief director Dr. Quispe would not be able to join us as he had been called to treat two Japanese patients at six that morning!

So, what did Dr. Loza have to say about this apparent resurgence of traditional medicine? 'It's a myth,' she said. 'It's not at all true, it's rhetoric'.

In our conversation, Dr. Loza fiercely contested the story conveyed by the Vice Ministry. She maintained that modern medicine was more popular than traditional medicine, that kallawayas were still being persecuted in Bolivia and that there were 'less and less kallawayas every day'. This is still happening predominantly because the majority of the government 'think they are crazy'.

On first glance, the statistics overwhelmingly support Sr. Mendoza's interpretation. The numbers confirm that traditional medicine is indeed very popular amongst the Bolivian people. A recent survey highlights how 80% (over 6 million Bolivians) have turned to traditional medicine at some point in their lives. Furthermore, the government are supportive: Vice President Alvaro Garcia Linera proposed in March 2011 that Universal Health Insurance will include free traditional medicinal services. It would appear that, in the words of Vice Minister Sr. Mendoza



– ‘the future of traditional medicine is very bright – the articulation of academic and traditional medicine has been a great success’.

Dr. Loza disagreed. She quickly put forward her interpretation of the state of medicine in Bolivia. ‘It’s a Labyrinth. No one knows quite what to do or where to go. If traditional medicine is the most popular method of treatment among Bolivians then why are the consultation rooms of Kallawayas made of nylon? Of course modern medicine is more popular. How could it not be when it is so widely available and promoted by the government? Kallawayas are persecuted as ‘witches’ just like they used to be. Regardless of whether traditional medicine has been officially recognised (as it was in 1984 by the Bolivian Government of the time), the future of traditional medicine is very dark and uncertain.’

‘Dark and uncertain’ or ‘bright and a great success’? Again, I was left confounded by her response – how could it be that these overwhelming statistics were an incorrect

portrayal of the state of medicine in Bolivia? Why would the government and Vice Ministry care about arguing that traditional medicine is ‘the first step in recovery for Bolivians’ if it this is not true?

According to Dr. Loza, the only reason for the supposed acceptance of traditional medicine is an ideological convenience within a political context. Evo Morales, the current President of Bolivia, represents the Aymara people and advocates for a pluralist nation. His government stands for pluralism, accepting that Bolivia has many cultures and that each of them is as important as the other. In this pluralist state it is essential to encompass the medicinal practices of all of the many cultures and to claim their parity. That is to say that there must be a non-hierarchical medical system which presents both traditional and western medicine as viable options of recovery. And yet this is ‘mere rhetoric,’ according to Dr. Loza. Aside from the debate, there appears

to be a growing syncretism of modern and traditional healing practices in Bolivia. In December 2011, for example, a ‘hepato biliary syrup’ made using Andean Plant extract was the first drug using traditional medicine to be legalised by the Ministry of Health. This action directly negates the view that plural science is no more than rhetoric. Again, the issue of whether or not traditional medicine is being accepted seems to be shrouded with doubt.

As no more than an outsider, it would be wrong for me to say which of these arguments portrays ‘the reality’ of the state of medicine in Bolivia. Lucky for us, in July of this year the government will publish a census that should help clarify the doubts that complicate the debate. One of the questions in the census asks what the natural first step in medical recovery is for people in Bolivia. Perhaps only then, when the census is published, will the true condition of Bolivian medicinal practices be revealed. Until that point, though, uncertainty remains the order of the day. ✕



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## WHAT YOU WANT IS WHAT YOU GET

TEXT: ROB NOYES

**O**n the steep inclines of the city, littered amongst the shoe-shiners and salteñas, lies a smattering of **farmacias**, small chemists typically staffed by one or two people in white coats. Their sheer quantity highlights their importance among the Bolivian population's healing alternatives.

And there are alternatives in Bolivia; concurrently to modern medicine Bolivians have the option to see traditional doctors (see p.18 and p.26), or even attend a service at their local evangelist church for a miracle cure (see p.14).

Alternatively, they may opt to self-medicate: known in medical circles as *autoatención*. This includes self-prescribing, or asking friends or family for health-related advice and then obtaining the requisite medicine at the pharmacy.

Depending on the cultural and religious background of the family, they may choose different combinations of the choices presented above. However, according to Dr. Ramírez Hita, a social anthropologist, *autoatención* is the most commonly followed form of healthcare in Bolivia and relies primarily on the women who are at the centre of this self-care system. The mother diagnoses what type of condition the children or husband is suffering and how to cure it.

Self-care is particularly common in the rural areas where few people go to medical centres. Dr. Ramírez Hita attributes this to the poor medical infrastructure, the low quality of the treatments provided by the personnel, and the little confidence the local population has in the medical system.

More generally, the popularity of *autoatención* appears to be largely due to cost and convenience. Asking friends and family for medical advice is free, going to a doctor for a consultation is not.

Ximena Bastos, whom we spoke to for the article on homeopathy (see p.22) told us: 'Pharmacies give you what they have, not necessarily what you need. It could be medicine that is too strong for what your symptoms are, or something too weak, or even unrelated'.

Eager to learn about the practices of the pharmacies themselves first hand, I hea-

ded to the first one I could find and spoke to the small man drinking his coffee behind the counter. He told me that the Bolivians were 'generally pretty health conscious people', and that as such the pharmacies were phenomenally popular. They are cheaper than doctors as well as being quicker. Yet he stressed that they can only do so much—anything bought in a pharmacy must be used in accordance with medicinal advice.

For example, in the winter, the Bolivian Health Ministry provides flu shots to protect the population during the harsher months. Yet as flu is a highly variable virus, and antibiotics do not cure influenza, pharmacists will regularly recommend taking the plant *Echinacea* in order to boost your immune system. Following this advice, Bolivians will flock to the pharmacies to buy this plant to help them stay healthy over the winter months.

During this course of our conversation with the kind man behind the counter, I carefully watched two customers doing what they do. The first, an elderly gentleman, strolled in and began to relay a story of how he had been struggling to sleep over the last few nights—an innocuous tale. Surely Night Nurse and maybe some chamomile tea will do the trick? No. The pharmacist pulled out the Valium.

Valium is a highly powerful sedative from the benzodiazepine family. It is not available as an over the counter drug normally, as it can be addictive. Furthermore, half of the drug will still be in your system as long as 90 hours after consumption. Large doses can cause blurred vision, slurred speech and impaired thinking; an overdose can result in death.

Struck by the banality of the scene I am inclined to agree with Ximena—'pharmacies give what they have, not necessarily what you need'. Surely this was a sign of malpractice by the pharmacy itself? No, said Ximena. Unfortunately, 'this speaks more of the poor infrastructure of medicine than of any incompetent pharmacists'.

Until other medical alternatives become more widely available, it seems like people will continue to get what they want at their local *farmacia*. ✕



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**I**n the city of La Paz, Andean cosmology has its own conception regarding the treatment of madness.

In the waiting room of la Caja Nacional de Salud (a psychiatric hospital) the clock on the wall shows it is almost 12:50. The secretary who works there saves her files on the computer and turns to a pair of patients seated on the

bench. 'The doctors are busy', she says. 'There is a strike and people are marching. I don't know what time they can see you. Wait, if you like'.

A plain-looking young woman, sporting a heavy pink coat in the heat of the midday sun, bumps into the secretary at the door. She enters and gives a shy greeting in a soft but hurried voice, and covers her face with her greasy hair

upon receiving no response from the secretary. She sits down on the bench and disguises the shame of having been ignored by taking out lipstick from her purse and touching up her make-up.

Her name is Raquel and she is 32, though she introduces herself as Valeria and claims to be only 19. She's been coming to see the psychiatrist for seven years and yet the cold walls of the



ended in

ated to English by Alan Pierce

room still make her uncomfortable. At present, she lives in Cruce Ventilla, on the road to Oruro, and works in a hair salon.

That's where she had the first symptoms of her mental illness, a condition her neighbours understood as possession by an evil spirit. She hears voices of men that only exist in her head. The male voices usually speak when she

wears red clothing, saying that they want to rape her.

'My **yatiri** says that there is a mad spirit inside me performing witchcraft', says Raquel, while looking at the waiting room ceiling. It's 15:30 by now and she is the only patient still waiting there.

People like Raquel, who endure men-

tal illness, are treated in this psychiatric hospital and yet they often also visit traditional doctors, due to local beliefs regarding madness. In Andean cosmology, these doctors (or wise men) are known as 'yatiris' and they are often charged with the task of treating conditions that do not have rational explanations. This, at least, is how Dr. Fernando Cajías de La Vega explains it, adding that in Aymara culture madness



ILLUSTRATION: ALEJANDRO ARCHONDO VIDAURRE

is seen as an otherworldly infliction. Only the **yatiris**, he says, have a way of understanding, treating and curing the illness. People say yatiris were chosen by Aymara gods to do so, making the wise men very busy and well-respected individuals.

Today, people in La Paz continue to seek their advice and assistance. Yatiris acquire their materials from Sagárnaga street, known as 'The Witches' Market', although they often require no more than coca leaves and alcohol for their work. In special cases, during the **ch'allas**, or the treatment of a sick

patient, they visit the home of whom they wish to see. 'Everything has its price', says Dr. Cajías.

According to David, a yatiri living in Pucarani, traditional doctors have different abilities. They can diagnose people's past, present and future, and, because of their connection with the gods, they can physically and spiritually cure patients afflicted by either ailments or curses. Many people look to them precisely for these abilities.

According to David, other types of yatiris who are corrupt and 'diverted

by the path of evil', can also inflict curses on healthy individuals. These doctors are known as **laigas** and specialize in inflicting pain onto others. They have the ability to bring about madness using people's bodies as recipients of evil spirits.

Laigas create a link between a person and a curse by using something that pertains to the victim (a piece of clothing, a lock of hair, some type of object, etc). After giving an offering to an evil spirit, the **laiga** draws it to the recipient's body, causing abrupt changes in the victim's behaviour. According to Raquel's mother, this is precisely what caused her daughter's madness, after a young man who had been in love with her asked a **laiga** to cast a spell on her. The young man allegedly offered a piece of Raquel's red clothing in order to curse her, after which the **laiga** brought forth a soul which attracts men to the victim, especially when she's using red clothing.

Raquel believes that an element of mysticism exists in what is happening to her, but she also trusts the psychiatrist she visits regularly. He tells her the voices she hears don't have a cure, but that she can control them with medicine, therapy, and sustained treatment.

Raquel was diagnosed with paranoid schizophrenia, which, according to Dr. Mario Sánchez, is an illness that causes emotional problems on top of hallucinations. 'A lack of emotion is brought about, one doesn't react emotionally', explains Sánchez. The family suffers a great deal, as does the affected individual, who becomes depressed and loses willpower.

Although she is constantly touching-up the color of her lips, one can see Raquel's lack of motivation in her personal neglect. She looks at herself in the mirror, holding it with rough hands



that reveal her chewed up fingernails. The dirt underneath them mixes with residues of the red nail polish she put on several weeks ago. Her long hair, put up in a ponytail, reveals the accumulated dirtiness of her scalp and the faded, split ends that fall softly down her back. The pain and the suffering that she endures in her heart is present in her vacant gaze, fixed on the mosaic floor in front of the doctor's door.

The medications help control the hallucinations, Dr. Mario Sánchez explains, but there is no cure for the patient's depression. 'The medications leave you without motivation to do anything, like a cat that only wants to sleep', says Raquel, leaning on the shoulder of a friend she just met in the waiting room. Specialists confirm that patients stop taking medications because of these side

turn to the hospital, they appear to have improved, although many times they return in a deteriorated state or, in the worst cases, they return with bad news.

Sánchez recalls that some time ago he tended to two brothers with schizophrenia who lived in Viacha, 'the family and the community abandoned them, everyone behaved aggressively towards them. I got the impression that they could have done something to these patients, because all of a sudden they stopped coming to the psychiatrist appointments; one had disappeared and the other, we found out, had died'.

People with mental illnesses are often seen as an evil presence in their community. Since they are perceived as a negative reflection of the social group, the community often

forces the family to address the problem with the help of yatiris.

Although in La Paz schizophrenics turn to yatiris unbeknownst to their doctors, in Cochabamba, these patients engage in rituals with their yatiris inside the hospital. In the Corazón de Jesús Hospital, for example, traditional doctors come from afar and use

## There's also an inherent conflict between the growing Westernization of Bolivian society and a still-strong traditional indigenous background.

incense, cleansings and offerings to the gods to ensure the mentally ill are well tended to.

'In Tarija, the "crazies" walk the streets', Dr. Sánchez says. 'They are given work, and violence against them is rare. They are poor people, deep in their own world'.

Psychiatrists indicate that 80% of schizophrenics recover, but that the remaining 20% are incapable of continuing their daily lives and are institutionalized, in some cases for life. On top of this reality, the World Psychiatric Association claims that 83% of the global population doesn't know what schizophrenia is. The Aymara, whose cultural background provides a different understanding of this type of madness, most likely fall in this category: they can't be said to know what schizophrenia is.

Raquel grabs her belongings and a man in a white coat hurriedly enters the room. Ignoring her greeting, he enters his office and closes the door. Raquel stops abruptly and is crowded against other patients trying to enter before her. The clock in the waiting room shows 16:50. ✕

## Her name is Raquel and she is 32, though she introduces herself as Valeria and claims to be only 19.

effects, as well as the cost and difficulty of obtaining them.

Dr. Mario Sánchez explains that it is common for patients to leave psychiatric hospitals to seek treatment from yatiris, explaining it is pretty common amongst the lower classes. He adds, 'Maybe the middle class does it too, but they don't mention it'. When they re-



# EVERYDAY MIRACLES

PORQUE NADA ES IMPOSIBLE PARA DIOS

MATTHEW PAYTON LOOKS AT THE REALITY BEHIND THE MIRACLE CURES OFFERED BY BOLIVIA'S BURGEONING EVANGELICAL MOVEMENTS

PHOTO: KATIE ROGERSON

Evangelical churches in La Paz do not exactly promise a home visit from the local pastor, a place in heaven, or a seat on the flower-arranging committee. They offer miracle solutions to problems varying in magnitude from arthritic feet and terminal cancer to financial instability.

While these organisations are, according to their rhetoric, open to the general public, getting an insight into their practices is more complicated than it may first seem. These churches have a paradoxical relationship with the press, on the one hand owning large media corporations spanning radio, print, television and online channels, yet on the other hand being all but closed off to inquisitive journalists such as myself. Years of unfavourable media attention, political disputes between factions, and the large sums of money they mobilise, have turned these churches into organisations which are at once attention hungry and media shy.

## GETTING IN

As a first attempt, I try to enter the 'Pare de Sufir' church a few blocks from Plaza Murillo. My first impression of the edifice didn't correspond with my mental image of what a church is supposed to look like: instead of finding myself in front of a neo-gothic building with decorative flourishes, I find myself in front of a businesslike facade made up of grey marble, glass doors and spotless brass features. Upon entering the atrium I am met by two besuited security guards and a receptionist, none of whom are interested in satisfying my curiosity.

After further failed attempts I approach another similar church, the grandilo-



quently named 'Ministerio del Nuevo Pacto Poder de Dios' (Church of the New Covenant and the Power of God). This church, commonly known as 'Poder de Dios', owns a radio and TV channel, and has even launched its own political party, 'Concertación Nacional', filling the stadium Hernando Siles and the Plaza San Francisco during the rallies of their heyday. While its fortunes have receded somewhat in the last few years, it remains the largest evangelical church in Bolivia.

## THE DEVOUT

I am put in contact with Roberto, a member of the congregation, whom I eventually meet after navigating my way through the labyrinthine passageways known as 'Mercado Uruguay'. On finding my Livingstone, we settle in an intimate alcove of a small juice stand, the walls of which are covered in sooty posters of football players, wildlife scenes and colourful devotionals of Jesus Christ.

Roberto, a 55 year-old **Paceño** with a hardened lined face, scrapes his living as one of the several thousand traders who buy and sell their wares in this mercantile quarter. Upon being asked how long he had been a member of Poder de Dios, he replied instantly that he has 'always followed Christ'. On my tentative insistence he explained that he has been attending the church for the last four years after an introduction by his wife, who's been a part of Poder de Dios for the past twelve.

Roberto attends the flagship Poder de Dios megachurch, 'El Monumento a la Fé, Casa de Dios, Puerta del Cielo' once a week on Sundays. Thought visited once a week, Roberto follows Poder de Dios' precepts 'all days'. He informed me that 'around 15,000 people attend the first session', a fact corroborated by several estimates that up to 40,000 worshippers pass through the temple throughout the rest of the sabbath.



By 6 a.m. around 200 people gather at the 'Monumento a la Fé', and more congregants gradually arrive from every corner of the city, El Alto, and even remote rural communities. The majority of the attendees are women wearing *polleras*.

The female preacher and self-proclaimed Prophet Mrs Magneli (the wife of Luis Guachalla, leader of the church) comes onstage. Magneli addresses sceptics, some of whom seem to think that the money donated goes into the pockets of preachers. She denies this claim explaining that the donations are being used to buy a new satellite for the church's TV station to expand its reach.

A second group comes onstage bringing offerings in the form of large sacks of rice and potatoes. There are two small children, one of whom has leukemia. They pray to the Lord and curse the devil. Magneli marks some worshippers with oil and blows on them. They fall to the ground and tremble. Some of them laugh uncontrollably. A man who came onstage with breathing problems claims he no longer feels anything, and proceeds to run in celebration. Minutes later a woman is carried onto the stage. She is on a bed lifted by four people.

Magneli makes reference to the tithe and its importance, pointing out that this is money that belongs to God. 'You can fool me but you can't fool God; he knows how much you earn and therefore knows what 10% of it is. Not giving him this money is theft'. She sends a group of around 50 young men with donation buckets to every corner of the audience to collect the 'voluntary' offerings.

There are around 8,000 people at 8:30 in the morning when the leader of the church, the self-proclaimed 'Apostle' Luis Guachalla, finally appears onstage. At around 9:00 Guachalla begins his sermon. This is the central moment, and despite the heavy atmosphere caused by the heat and humidity brought about by having thousands of people in an enclosed space, they all stay. He finishes the sermon with an explosive 'Power of God!', making the entire audience enter into a cathartic state of mass frenzy. People fall over forward and start trembling on the floor. 'This is the Holy Spirit acting within you brothers and sisters'.

Roberto, himself, has experienced various miraculous recoveries from medical ailments, all of which he attributes to Poder de Dios. He recounted suffering from nosebleeds 'every evening at 7.30 p.m.', until his wife prayed and 'handed him to God, Instantly curing him'. His wife, similarly, suffered from pneumonia a few years ago until he prayed at church and was able to witness the disease leave her body. She has been clear of it ever since. When asked whether he considered going to a doctor for his ailments, he explained that his body reacted badly to anaesthesia, adding that he was once hit by a doctor as a boy, leading to his rejection of the medical profession.

Yet his stories, incredibly, are not extreme by the standards of the Poder de Dios website. Featured on this portal are stories of pious members being cured of cancer and arthritis, as well as bizarre cases of people not only being ridden of serious tooth pain, but miraculously appearing with a

mouth full of gold-plated teeth. Roberto explains that dentists who were brought in to examine this phenomena, stated that the metal was not used by their profession. Roberto's conclusion is that the metal must have 'come from the heavens' and is therefore 'supernatural'. Based on such cases, Poder de Dios distributed pamphlets which invite people to 'come and find your miracle'.

## THE TEMPLE

After speaking to Roberto, it became clear I had to visit 'El Monumento a la Fé' to see for myself. Following my experience at the central branch of Pare de Sufrir, I was all too aware that attempting access using my pigeon Spanish and European visage could pose an issue. However, I was determined; and arrived with a group of friends under the pretense of being teaching volunteers keen to explore our Christian faith away from home. The only information I have on this enormous edifice

is the computer generated image I found on their website, as well as the fact that it was built on top of the former factory for Papaya Salvietti, a popular fizzy drink.

The ostentatious 'Monumento a la Fé' has the look of a half-finished sports stadium painted yellow with polarized blue tinted windows. We were quickly ushered into a service held in one of the smaller chambers, where 50-or-so men and women were being dizzied into frenzy by a band playing repetitive and gradually climaxing music. The band was fronted by a tie-and-shirt-wearing pastor who sang and spoke in simplistic devotional phrases with sudden bursts of motion and cadence. The congregation reacted to each crescendo with tears, wails, shrieks, shouts, and even the occasional jumping fit. **Cholas**, teenage girls and middle class women all clutched tissue ready for the next torrent of tears. When the senior pastor finally took to the podium, he launched into the most staccato, ear piercing and animated recitation of Luke's gospel I have ever heard. The congregates further descended into hysteria with one *chola* even banging her head on the floor, seemingly out of control.

It is difficult not to feel uneasy enduring suspicious looks from members of the church staff, as well as the wall to wall wailing of our fellow attendees. At one point the preacher nodded to an assistant to bring forth the donations bucket. In a united Pavlovian fit, the entire swaying congregation suddenly halted in their trancelike states to fight to reach the assistant first and donate their money. To witness congregants being overcome by such desperation to donate money—for impoverished folk any sum is large—was a truly uncomfortable spectacle for a first-world denizen.

While on that day I did not witness any healing miracles, I was able to see the level of power the Poder de Dios Church levies over its members, seemingly premised on a dual mastery of emotive manipulation and show business. The most remarkable discovery of my investigation was the everyday regularity of such holy intervention, part of a worldview in which miracles are not a rare occurrence but rather a phenomenon that can be brought about routinely by following a ritual involving frenzied prayer and large donation, in more or less equal measures. ✕



**'THE ART OF MEDICINE CONSISTS IN AMUSING THE PATIENT  
WHILE NATURE CURES THE DISEASE'**  
*VOLTAIRE - FRENCH PHILOSOPHER*





PHOTO: CARLOS DIEZ DE MEDINA





## LAND OF HEALERS



FELICIA LLOYD SPEAKS TO GROVER QUISPE, A LOCAL KALLAWAYA, TO UNDERSTAND THE PAST, PRESENT AND FUTURE OF TRADITIONAL MEDICINE

PHOTO: CARLOS DIEZ DE MEDINA

**L**amas, lakes, less-than-safe public transport, **chollitas**, coca tea, and medicinal healers are all images we learn to associate with Bolivia, sometimes stereotypically. In the latter case, Kallawayas—traditional doctors of the Andes—are practitioners of a discipline popular and powerful enough to rival a Westerner's blind faith in modern drugs and science.

Here in Bolivia, a visit to a local **Kallawaya** (which comes from the Quechua 'kolla', for healer, and 'waya', for wanderer) for a herbal remedy or a spiritual ritual to clear up a cold, is as commonplace as it is for a Westerner to make a quick trip to the local chemists for some Lemsip. Kallawayas, doctors of traditional medicine, whose origins date from the early Tiahuanaco period, are today considered 'naturalists' as a result of their



extensive knowledge of plants and their uses.

The Kallawaya are a subgroup of an Andean Aymara group; while there are thirty-one different indigenous groups who consider themselves 'healers', the Kallawayas are by far the most famous and highly regarded. According to Ronald Watson and Victor Preedy (authors of 'Botanical Medicine in Clinical Practice'), traditional methods of healing are so popular that 80% of Bolivians will visit a Kallawaya at some point during their lifetimes, and 30% receive no Western medicine at all.

Whilst this could be attributed to a lack of cultural trust in modern science combined with financial obstacles, historically speaking, the Kallawayas have an extensive history of knowledge and exploration. It is said that these healers were performing brain surgery as early as 700 AD, and that their knowledge of plant concoctions and the simplest ingredients can produce remedies for some of the most complex illnesses. The Kallawayas were the first, for example, to use the dried bark of the Cinchona tree as an anti-malarial substance, and coca derivatives as anaesthetics. As Kallawaya Victor Quina assured us, as hard as some plants may be to get hold of 'there is a herb for everything'.

Many Bolivians consider themselves to be their own 'healers', resorting to treatments ranging from lime juice (for mosquito bites), to coca leaves (to treat anything from altitude sickness to allergies). The Kallawaya practice is influenced by the Andean perception that illness occurs as a result of the disturbed interrelation between a person, the land and those around them—in other words, if both living and inanimate beings do not treat each other with respect, then the cosmic flow between all beings and things leads to imbalances, and with them illnesses.

To correct this imbalance it is important to understand that all beings are not isolated but interrelated. Thus, to rectify a physical or psychological ailment you must rectify the relation among natural

To find out more about Kallawayas and traditional healing, I spoke to Grover Quispe Tejerina, a Kallawaya who works in an office among the higgledy piggledy shacks and corrugated iron roofs that compose the backdrop of the Witches' Market of La Paz. Contrary to what I expected (a withering Dumbledore-esque man dressed in nothing

**As a Kallawaya, people come to me to call their soul back, so that they regain their strength and fight the illness off.**

but a poncho, perhaps riding on a floating llama), we were greeted by, forgive the irony, a rather Westernised-looking doctor dressed in a simple shirt and a leather jacket.

The only thing that possibly gave him away to his affiliation with Andean tradition was the gold-rimmed rows of teeth that glinted as he smiled. Tucked away in his shadowy office, adorned with golden frogs and jewelled snakes, colourful flags and calendars following an unrecognizable chronology, Dr. Grover Quispe began to inform us of how he became a Kallawaya, and what it meant to be one in Bolivian society today.

When asked about his patients and treatments, Dr. Quispe was fiercely proud of his trade. 'It has never failed me', he said. He claims there has been no malady so grave that Dr. Quispe hasn't been able to cure it. This is not to say that he doesn't believe in the strength of Western medicine, but he often finds that many people come to him having visited a modern medicine doctor beforehand, and bring faith that traditional medicine goes further and deeper in fixing the problem.

'Many people come to me out of fear', he tells me. 'We believe the 'ajayu' (soul) can leave the body when you're scared, and that leaves you vulnerable to illness. As a Kallawaya, people come to me to call their soul back, so that they regain their strength and fight the illness off'.

One thing I was particularly curious about was to the extent to which his practice is supported by tourism; you need only walk a few steps through the Witches' Market to notice that it is, for many of the vendors, the 'gringos' that are the desired demographic.

Prior to my investigation I was convinced that most tourists who visit these healers did so as an easy way to 'get high (man)'. However, Dr. Quispe assured me that the majority of his patients are genuine, and he does not attend those that aren't.

Tourists who come with a 'fake illness' are easily detectable, and go home untreated. Since Kallawayas are highly regarded in the community, it is also possible to find those who fake their healing powers. With a disapproving look, Dr. Quispe mentioned how it is possible to find 'fake Kallawayas', who treat the practice as a means to earn money and achieve authority in society. You can tell if a Kallawaya is 'fake' because he won't be able to speak the secret, ancient language 'Machaj Juyai'.

The Kallawaya power is something that resides in a family through an indefinite number of generations, and it is a knowledge or practice that Dr. Quispe learned from his father (although some Kallawayas are said to have been chosen by a strike of lightning bolt). It is possible for a woman to be a Kallawaya, since in many rural communities they are the ones to collect, dry and preserve the herbs for remedies. While the Kallawaya practice can be learnt, it is a power that is predominantly maintained and passed down the male lineage, from father to son; if a female Kallawaya were to die, then the power dies with her, and does not pass along a generation.

Dr. Quispe is optimistic about the future of traditional medicine, assuring me that it would continue to thrive, since the knowledge and practices were a well-preserved secret. 'If you are blessed with the power', he explained, 'there is little that can be done to avoid assuming the role of a Kallawaya'. If a child were to deny the Kallawaya heritage, then he or she would encounter many problems in life. As Dr. Quispe said 'it is like a destiny'.\*

# OPEN YOUR HEAD

ONCE THE DOMAIN OF PERUVIAN SHAMANS, HALLUCINOGENIC CEREMONIES ARE BECOMING INCREASINGLY POPULAR IN BOLIVIA.

TEXT: CARLOS (KAAMIL) SHAH

ILLUSTRATION: MARCO ANTONIO GUZMAN ROCABADO (MARCO TÓXICO)

Any mention of hallucinogens in the West usually conjures up images of spaced-out 1960s rock stars and bearded baby boomers in washed-out T-shirts imploring us to ‘keep it real’. But in Bolivia, hallucinogens are a much more ‘real’ and important part of culture than we could imagine back home. And since sacred plants containing psychotropic substances have been used for spiritual healing here for millennia, I decided to seek out the experience and the powers and dangers of the hallucinogens native to this Andean country.

If you’re looking to cleanse your soul, fight your demons, and connect with the spirit world, Miguel Kavlin of the Sacha Runa organisation in Bolivia is your first stop. Sacha Runa is a network of people in Bolivia and Peru dedicated to the proper use and promotion of the two most famous hallucinogens endemic to South America, ayahuasca and the San Pedro cactus. The members of Sacha Runa conduct spiritual ceremonies that draw upon indigenous tradition, which are open to foreigners as well as ordinary Bolivians. The organization runs an eco-tourism company called Bolivia Mistica that holds retreats in La Paz and Rurrenabake, a small town in the Amazonian Beni department.

The San Pedro cactus grows in the Andean regions of Bolivia, Peru, and Ecuador, normally at altitudes between 2,000 and 3,000 meters, while ayahuasca is found deep within the jungle. Miguel says that the two ecosystems where each plant is found influence their effect on the mind. ‘They both act in the same way, opening up our mental barriers’, he

**If the potential of the trip is ‘as vast as universe itself’, as Miguel says, then why wouldn’t people be curious?**

told me, ‘but whilst the effect of San Pedro is often masculine and inspires movement, the effect of ayahuasca similarly resembles its plant—a vine, constricting and drowsy’.

His interpretation of the psychotropic effects of San Pedro as a masculine and kinetic experience is easy to see. A quick drive south of La Paz will take you to the Valle de la Luna (‘Moon Valley’), an otherworldly mass of jagged rocks and daunting cliffs. And rising tall above the rocks is the great cactus of the **altiplano**—San Pedro. Also called huachuma

in the Quechua language, the San Pedro cactus was named after Saint Peter, who guards the gates of heaven. By eating the cactus, one is able to ‘enter heaven’. Miguel told me of how, in San Pedro ceremonies, participants will often dance and conduct spiritual pilgrimages due to its kinetic and energising effect.

Ayahuasca—the ‘vine of the soul’ in Quechua—is arguably a deeper and more intense experience than its Andean counterpart. According to Miguel, ayahuasca ceremonies usually involve groups sitting immobile in a circle. Although it’s much more well-known in Peru and Brazil, at least six tribes in Bolivia have been known to use the vine as part of their rituals, including the Moxos people of Beni. Recent archaeological evidence has demonstrated that the Tiahuanaco civilisation of western Bolivia (circa 500–950 AD) used the hallucinogen. Traces of the alkaloid harmine, the main chemical component of ayahuasca, were found in the hair of mummified remains in the Atacama Desert. This is surprising as the Tiahuanaco civilisation did not have an immediate source of ayahuasca, as they lived in the Andean region, rather than the Amazon. This shows that they were actively transporting plants from the jungle for hallucinogenic use. This serves to underline the importance of hallucinogens in the pre-Colombian culture of Bolivia.

However, as much as I found evidence of hallucinogen use in Bolivia, I was still sceptical on whether ayahuasca or the San Pedro cactus could really have healing powers. Miguel enlightened me on this aspect. ‘Ayahuasca is the medicine for the twenty-first century. No longer are we able

to devote our lives to monasticism as we did in the past to overcome psychological pain’. But, he added, ‘ayahuasca and San Pedro can cure people with years of trauma in such a short time’. The ability of the drugs to bypass our minds and our psychological barriers might make them some of the most useful therapeutic tools in the modern-day battle against depression and addiction. The purifying ability of these hallucinogens could be their most powerful effect. Miguel’s testimony, along with hundreds of Internet posts, attest to hallucinogen use as being invaluable in curing people of traumas



and deep psychological problems—problems modern psychiatry and conventional therapies have difficulty in treating. Obviously, cures cannot be promised to everyone. According to Miguel, the beauty of these plants lies in the different effects they have on different people.

But dabbling with the brain is never without its dangers. In recent years, the use of ayahuasca and, to a lesser extent, the San Pedro cactus have taken off as a tourist attraction in neighbouring Peru. Ayahuasca related deaths have been reported over the last few years. Ayahuasca is not dangerous per se, but its combination with other medication and/or an unstable mental condition can have dramatic consequences. One tourist reportedly hung himself following a bad trip. Miguel tells me these drugs have become party aids in Cusco, to the point where he has even had to heal those who have suffered from bad experiences as a consequence of using it irresponsibly. He could not have been more clear on the importance of observing the proper ritual with regard to hallucinogens, with mutual trust and a proper environment being essential to guard against the possibility of a bad trip and psychological damage.

While I declined to partake in the ceremony on this occasion (too many daemons!), Miguel spoke of the growing popularity of hallucinogen use in Bolivia. 'I get kids from El Alto as well as housewives from rich areas', he said to me. Whilst hallucinogen use has long been a rather taboo subject, too commonly associated with the production

and trade of narcotics such as cocaine, Bolivia is beginning to follow the trend and more and more people voluntarily choose to try 'the Sacha Runa way' than ever before. If the potential of the trip is 'as vast as universe itself', as Miguel says, then why wouldn't people be curious?

As for myself, having a browse through the hippie-ish websites devoted to San Pedro cactus and ayahuasca, I'm a little skeptical that these drugs can really transport me across the 'space-time

continuum' and make my subconscious 'open like a flower' (ma-aaan!). Yet the hallucinogens certainly have their believers here in Bolivia, and they might offer an interesting alternative to Western psychiatric medicine, in which habitual dosing of profit-making pills is the norm, and which infamously treats symptoms rather than addressing causes, often involving an uneasy tradeoff between chemical dependency and psychological suffering. These times may call for people to put down their pills and pick up a cactus.✕





# HEALING IN SMALL DOSES

TRADITIONAL AND WESTERN MEDICINE HAVE A STRONG Foothold IN BOLIVIA, SO WHERE DOES A GROWING ALTERNATIVE MEDICINE LIKE HOMEOPATHY FIT IN?

TEXT AND PHOTO: ALAN PIERCE

From traditional healing, to Western medicine, to alternatives like homeopathy, Bolivians have a diverse collection of healing options to choose from.

In this family of healing alternatives, traditional medicine could be said to represent the sage parental figure, with centuries of healing techniques and accumulated knowledge behind it. Western medicine is more like an adolescent maverick; confidently churning out innovative cures, sometimes so swiftly that suspect side-effects are quickly glossed over.

Then there is homeopathy, an adopted member of the Bolivian medical family, locked out of the economic household and relegated to the kid's table during important dinner conversations. And yet, as it gradually establishes a Bolivian identity, it does so through an effective mixture of personal healing experiences, the word-of-mouth referrals that follow. Not to mention a small group of dedicated professionals, patiently fighting to find a more prominent place for homeopathy in Bolivia's medical family tree.

According to La Prensa, a Bolivian broadsheet, there are around 30 homeopathic doctors in Bolivia, with about half of those working in the city of La Paz, which is also home to the Homeopathic Medical Association of Bolivia, and the only Bolivian homeopathic remedy production and distribution centre, the Hahnemann Laboratory.

This small laboratory houses several offices, a room lined with homeopathic products at various stages of production, and a mysteriously palpable passion for homeopathic

practice in the air. In the presence of Ronald Peterssen, the jovial General Manager of Hahnemann Laboratory, I was able to witness this passion first-hand as he exuberantly described the development of homeopathic medicine in Bolivia.

'This laboratory was founded in 1983 and since then has grown both in the reach of its distribution and in its public visibility', Peterssen explained. His optimism sparkled as he relayed numerous anecdotes regarding homeopathic healing, as well as through his expansive knowledge about homeopathic remedies and treatment.

*With every new patient, and every subsequent healing, I fall more and more in love with this medicine. To me, homeopathy is the most perfect medicine in the world. And I think Bolivians, as well as the medical community, are increasingly starting to see this too.*

The theory behind this 'perfect medicine' originates from the work of the 19th century German physician the laboratory is named after, Samuel Hahnemann. Homeopathic remedies treat the human being holistically, focusing on addressing the cause of symptoms rather than simply attacking the symptoms themselves.

'Homeopathy uses the law of similarity', explains Dr. Joseph Henao, a highly regarded homeopathic doctor and director of the Children's Hospital in La Paz. 'Homeopathic remedies contain minute amounts of substances that cause symptoms, which when used in these highly diluted amounts, helps cure those same symptoms'.

He explains that since an onion causes symptoms like a runny nose, a homeopathic remedy for that symptom could contain highly diluted amounts of onion.

According to the Society of Homeopaths, some aspects of Western medicine use this same principle with medications like Ritalin, a stimulant used to treat ADHD, or in the treatment of allergies, by exposing patients to small amounts of allergens in order to desensitize them to the effects of larger doses.

Homeopathy differs from these conventional approaches because it uses only non-toxic doses of the treatment substances. Because homeopathic remedies use such small, diluted amounts of a certain substance (1 drop in a 100), they are non-toxic and have no side effects.

Ximena Bastos, a Bolivian who has been using homeopathic remedies since childhood, tells me she often recommends this type of treatment to her friends and family, explaining that the attraction of homeopathic remedies for many Bolivians comes from their holistic focus.

'Bolivians seeking homeopathic remedies are looking for something that will heal them from the root of the problem, not just the symptom', she explains, 'those who are disenchanted with modern medicine's symptom-oriented approach seek a more holistic model and find that homeopathy fits that bill'.

Are homeopathic remedies the be-all-end-all solution for health problems? Ximena is the first to say, 'of course not', but asserts also that neither is modern or traditional





medicine. For her, a combination of complementary approaches is most effective, as she emphasizes that maintaining an openness to multiple modes of treatment may be the most salutary attitude.

For most Bolivians, however, there is not an openness to alternatives like homeopathy. Since homeopathy, which originated in Germany, is so foreign to the local context, Ximena explains that, 'the people who are open to it, and seek it, are usually only those who are more worldly in their experience; either they have lived in foreign places, have family who have done so, or have travelled a lot'. In other words, an openness to a form of healing like homeopathy greatly depends on the diversity of one's familial, social, and cultural personal history.

## Since an onion causes symptoms like a runny nose, a homeopathic remedy for that symptom could contain highly diluted amounts of onion.

Part of this personal history, which has played a key role in homeopathy's growth in Bolivia, involves the informal word-of-mouth referral process among family, friends, and colleagues.

This referral process, based on first-hand experience, may in fact be homeopathy's greatest ally. Dr. Henao explains, 'we don't do any advertising at all for homeopathic treatment. It's something I can suggest to a patient, but most of the time we receive patients requesting homeopathic options based on advice from their friends or family members'.

Dr. Henao also notes that Bolivians end up in his consulting room for homeopathic healing, 'when other avenues have failed, or there currently is no established cure in other medicinal realms (i.e. cancer, lupus). They are desperate and looking for more options'. This coincides with accounts given by traditional healers, collected elsewhere in this issue.

From its attraction as a form of holistic healing, to success stories that spur the mainstream practice of homeopathy, the discipline's role in Bolivia's medical milieu is perhaps best described as a complementary option that is growing in popularity. However, what may still be stunting the growth of a clear homeopathic identity in Bolivia is not just the perception of

its medical value, but the public perception of what it should cost.

According to Dr. Peterssen, 'to me, it is not an elitist medicine. Our homeopathic remedies are very cheap, and when people hear it only costs something like 20 pesos, they laugh, but medicine does not have to be expensive to be effective'.

On the other hand, a homeopathic consultation with Dr. Henao may cost as much as a conventional medicine con-

sultation, a surprise to many Bolivians since they assume alternative therapies are cheaper than visiting a doctor, perhaps a sign that they're not valued as highly.

Ximena offers her perspective explaining that, 'often, Bolivians expect alternative medicine to be cheaper than Western medicine, but in the end you are still paying for someone's time, their talent, and their knowledge. And often you receive more attention from homeopathic doctors than their busy Western medicine counterparts'.

These perspectives highlight an important facet of homeopathy's struggle for recognition in Bolivian medical and lay circles, in spite of its growing popularity among its users. The general public's expectations around the cost of these services imply they're still perceived as medically inferior.

Perhaps this perception is inevitable, as value is so often judged in monetary terms. Dr. Henao laments that, 'there is very little economic support for homeopathy, and it needs someone or something with influence to support it both monetarily and socially'. However, what may change this lack of support, and what appears to be changing this perception of inferiority, is the commitment and testimony from homeopathy patients.

Thus, while homeopathy still appears to be in an adolescent phase, slowly developing a Bolivian identity, the steady surge of users and interest indicates homeopathy's growing presence as an important complement to the Bolivian medical family.✕

# IF IT CURES, IT CURES

## DOÑA ANDREA DE CHOQUE FRACTURE SPECIALIST

Natural healer Doña Andrea de Choque lives on a steep hillside road tucked among the busy streets of El Alto. She's known throughout South America, and attracts lawyers and businessmen who seek her healing powers, along with local working-class people.

Descended from a long lineage of healers, Doña Andrea gained an interest in the field when clients of her father's, who was a healer himself, came looking for him after he died. Sixteen years later, clients from as far away as Chile and Argentina come in search of her at her consultation room in El Alto, perched on a set of steps in El Alto overlooking the vast views of La Paz.

Having never studied at university, Doña Andrea claims that 'it is only through personal interest that you can learn the knowledge of curing'. Her son is now following in her family's legacy, and she teaches him all she knows about the importance of natural herbs and dried lizards.

When waiting for Doña Andrea, a customer comes in seeking advice for a broken finger. She provides him with a bag of **parche natural** and a jar of alcohol, advising him to put the paste around the bone, supporting it with cardboard and clothes, using them as a makeshift cast. 'Even with very serious injuries, people come here first for a parche', she says. Doña Andrea also claims that even when her patients go to hospital to be operated on, they return to her as part of the healing process.

'If it cures, it cures', she says, explaining a pragmatic and seemingly untheoretical approach to healing. Doña Andrea, who is renowned for her bold and strong character, has scared off some potential clients. But when even some modern-medicine



PHOTO: SOPHIA HOWE

doctors recommend her treatments, it's hard to stay away. Upon first meeting Doña Andrea, her secretiveness was intimidating, but she soon opened up when I asked her about her most popular remedy, her 'pomadas de lagarto'.

Live lizards and snakes from the countryside are jammed inside jars and soaked in alcohol, which slowly dessicates them. This lizard-essence-infused alcohol is used to cure fractures, dislocations and broken bones. Doña Andrea requests other natural herbs from **campesinos** in the Yungas and the **altiplano** to make the parche natural.

Belying Doña Andrea's hard exterior, her ointments are made accessible to all clients, rich or poor. They range the gamut from famous footballers and lawyers to the homeless, who may only be able to afford five bolivianos instead of the normal charge of ten.

Posing for a photo outside her consultation room, Doña Andrea whispers under her breath, 'does my bum look big in this?' It's in phrases like these that one wonders whether she's just as normal as the next person, with a heart open to anyone who needs a healing hand.



# SOPHIA HOWE MEETS SOME OF BOLIVIA'S TRADITIONAL MEDICINE PRACTITIONERS, SOME OF WHOM ONLY USE NATURAL HERBS AND ANCESTRAL KNOWLEDGE; OTHERS DECIDEDLY MORE EXOTIC IN THEIR PRACTICES AND INGREDIENTS.

**VICTOR QUINA  
CASTRO AND  
GROVER QUISPE  
TEJERINA**  
KALLAWAYAS

To be a **Kallawaya**—a traditional healer, whose secrets are passed down through familial lineages—is a very respectable profession. But what if the next generation doesn't have that same interest to carry on these traditional cures?

A Kallawaya's secret knowledge is transmitted from father to son, whose destiny it is to follow in his father's footsteps. Nowadays, though, there are more choices for young men, and some have elected to abandon their family traditions.

The Bautista Saavedra province in La Paz and, within it, the village of Curva, are home to a large Kallawaya community, from which Grover Quispe Tejerina and Quina Victor Castro originate. These two healers have offices on the busy Calle Sagarnaga, in the historic central district of La Paz, from where they offer their healing powers to ameliorate such conditions as 'frightened souls', and sometimes just to educate inquisitive tourists.

Quina Victor Castro left Curva fifty years ago to come to La Paz. He learned all he had to know from his uncle Luciano. Still clinging on to



all his knowledge, he shows me the small notebook that belonged to his mentor. 'This is my Bible', he says.

All herbs used by Victor are dried in the shade, as it is not effective to dry them in the sun outside. 'I have to sell something good and effective', he says. 'The sun's rays destroy their healing properties.'

Herbs like willia and achuamani are used to calm temperatures, and sillu sillu, flor de Santa Maria, and crema de palpalambran are used to help

cure the pains of menstruation. They are all cultivated in Curva, from where they are supplied to all authentic Kallawayas working in the city.

Grover Quispe Tejerina explains how he reads coca leaves to determine how a patient's operation will go. If he reads anything bad, he tells his clients and they don't go to the hospital. 'Doctors send people to surgery for anything', he says. 'I decide to treat them or refer them to a naturalist doctor'. He's confident that his healing works,

saying that all of his clients are cured, adding, 'to believe is part of the treatment'.

The Kallawaya tells me a story that seems to prove the efficacy of his natural healing method: a heavily constipated French tourist had no relief for a year. After doctors failed to fix his unfortunate problem, he decided to seek out the Kallawaya community in the Bautista Saavedra province, ultimately consulting Grover Quispe Tejerina. 'With one herb the man was cured'.

PHOTO: AMARU VILLANUEVA RANCE





## DOÑA NATALIA

### A YATIRI

The bustling corners along Calle Sagarnaga reveal all varieties of traditional and cultural medicine used by locals and curious tourists alike.

After attempting to chat with many unwilling shop owners, Natalia, a **yatiri**, dressed in a floral pinny and Ugg slippers, welcomed me into her shop on Esquina Jimenez, which has been owned by her family for generations.

Yatiri literally means 'a person who knows'. Legend has it that one can become a yatiri by being struck by lightning, but, more frequently, yatiri healing knowledge is learned through training

by one's family.

Natalia is expansive when she speaks about her profession, explaining clearly what she does. She is, however, apprehensive about meeting clients at their homes, preferring instead to sell her remedies from her shop. They are taken as an infusion, costing a mere two bolivianos per ingredient.

Inside her shop, decorated with colourful packages and sweets, are thousands of medicines used to cure cancer, kidney problems, diabetes, vascular disease and depression. The rainbow of colours alone is enough to lift anyone's spirits.

Specialising in curing illnesses and cleansing spirits, **yatiris** also prepare *mesas positivas*—a sort of spiritual altar, or table, sometimes in the shape of a frog, for good luck—which, depending how they are prepared, can bring good health or curses. 'The table doesn't cure you physically, it cures your spirits', Natalia says.

She uses llama fetuses with white flowers on the *mesas positivas*. Llamas are considered sacred animals and have a strong spiritual power, and they can be used to prevent sickness throughout a whole town. In another, darker, ceremony, the blood of a black dog is splashed across a different kind of mesa, to place a curse on those who haven't paid their debts or have been unfaithful. These *mesas negras* are used to compel the afflicted to improve their ways.

Natalia took me through a **puertita** to show me her secret ingredients: dried starfish, ostrich feathers and eggs, a stuffed cat, dried glittery frogs, sea urchins, coloured mushrooms, shells and

coral, bones and numerous herbs drying in the shade, were laid in front of me in this yatiri's warehouse.

These traditional healing methods have not been tested extensively in clinical trials, although several of them have been used in the region for over a millennium. Natalia, however, says that Bolivian people place much more trust in natural medicine, and its use is on the rise. In fact, it's not uncommon, she says, for physicians trained in modern medicine to refer clients to her.

With such assorted miracle treatments such as **uña de gato** for cancer, it's surprising that more tourists have not yet sought out this alternative method of healing. Some do, says, Natalia, but 'they don't yet believe the wonders of these indigenous findings. They come in purely by curiosity, and rarely to look for a cure for cancer'. ✕





The increased availability and acceptance of cosmetic surgery in Bolivia dangles ideals of Western perfection tantalisingly on the periphery of the population's reach. Cosmetic procedures have traditionally only been available to those who can afford it, shaping the physical appearance of Bolivia's upper class, distancing them from their poorer, and typically indigenous, counterparts. Their Bolivia has historically been betrayed in favour of one which aspires to be 'tall, white and English-speaking', to quote Ex-Miss Bolivia Gabriela Oviedo's infamous words.

Cosmetic surgery in Bolivia is on the rise, with new technology becoming increasingly available, and the stigma attached to it rapidly diminishing. Cosmetic surgery now seems so widespread that anecdotes are abound, with one friend even telling me about a couple he knows who now sport identical noses. I discussed this difference with Andrea, a young woman who un-

## The industry, sometimes referred to as 'Beauty Tourism', is booming, with a reported increase of 60% each year.

derwent a rhinoplasty several years ago. She talks of her friends who have gone through various procedures and speaks of their willingness to discuss their personal experiences, trading stories and comparing the different services they have been given. Whilst 10 years ago people may have felt uncomfortable, now she claims the issue is 'wide-open'.

But as our conversation developed, Andrea suggested that, although on the increase, plastic surgery in Bolivia still remains largely confined to certain sectors of society. This is not necessarily driven by economics, but largely shaped by tradition and cultural heritage. For Bolivia's lower classes, plastic surgery is not seen as option, 'it is simply not on their radar', according to Andrea.

Dr. Valdivia, a local surgeon I spoke to, contests this claim, arguing that the gap between the poor and rich is narrowing with the astronomic rise of a new middle class. He's aware of these changes when patients arrive at his consultation room from unex-

pected backgrounds. Of the patients who come and see him, many of them 'can't speak good Spanish or have poor hygiene, yet they ask for an expensive surgery that they can definitely afford. Some don't even attempt to negotiate the price and pay in cash'. He explains that people are happy to share their experience with those in their social circle, and that this receptiveness is their most important source of publicity, 'if you do a good job with one client, they will bring you ten more. It is our most effective form of marketing'.

Dr. Valdivia understands his profession as a form of healing, seeing plastic surgery as a way of also providing a remedial service, from minimizing scarring after a violent incident, to curing a patient's inability to speak by improving their self-confidence. In his mind, this is the fundamental importance of the work he does. The focus is not on increasing margins to the exclusion of poorer patients, so he often reduces the price of a surgery to make it accessible to

as many people as possible.

Yet the industry as a whole is understandably defensive on the issue of its social value, perhaps guarding against the popular notion

that plastic surgery is merely a commercial venture which attends to a society's frivolous needs. One can easily get this impression by reading La Paz's newspapers, brimming with advertisements. According to one ex-patient, the different procedures (liposuction, nose jobs and breast implants) are sometimes even offered as combo deals. A Botox clinic even provides discounts if you 'invite a friend'. This can make us question whether the cosmetic surgery industry exploits, rather than heals, an injured self-esteem?

The commercial success of plastic surgery has certainly found a place in Bolivia's tourism industry, offering services for a fraction of foreign prices. Makeover Travel, a company based in Santa Cruz, offers a full facelift and ten nights in a 5 star hotel for £1500, in comparison with typical prices of £4,300-£6,000 in the UK, excluding accommodation. The industry, sometimes referred to as 'Beauty Tourism', is booming, with a reported increase of 60% each year. Bolivia's plastic surgery industry is undou-

btedly growing, yet this does not necessarily imply that it has found a place within Bolivian society; most of the information available in the local context concerns medical tourism, rather than trends among the local population.

Views on physical appearance in Bolivia are at a tension, with indigenous physiques competing against the prevalence of imported ideals of beauty, perhaps most notably in Santa Cruz. The dominance of beauty pageants in this department reveals a fixation on beauty that is saturated with Western ideals. Long legs, light skin and typically American features are the norm, as Roque Alvarenga, a makeup artist at Promociones Gloria (a model agency and pageant promoter) points out: 'In Santa Cruz, it's the culture of beauty'. The children who attend modelling schools are offered the option of plastic surgery from an early age, firmly modelled on an aesthetic of which international film stars and beauty queens remain the best exemplars.

A surgeon in La Paz reports patients requesting 'a nose like Brad Pitt' or 'lips like Angelina' though adds: 'We reserve the right to refuse surgery to patients who request modifications that we can foresee not going with their natural appearance'.

Yet after speaking to surgeons and patients, they both emphasise these procedures are more about self-confidence than a change in appearance. In other words, an ideal beauty is not an end in itself, but a means by which an individual can feel happier with their self-image. Another important aspect of this work involves reconstructive surgery done to people with disfigurements. In these cases, it would be callous to accuse these patients of frivolity when what they're after is feeling normal and accepted within an unforgiving society.

What remains to be seen over coming decades is whether Bolivian society is able to create new ideals of beauty more closely tied to the indigenous and mixed-race bodies of which the country is made up. One sees **Cholita** pageants in which the reigning ideals of beauty are based on different body shapes, charisma and character. Of course, let's not forget these archetypes often come with a mouth filled with gold teeth. If aesthetic conceptions can be reconciled with local identity, the cosmetic surgery industry will have to follow suit. This would surely be interesting, though should we perhaps instead wish for Bolivian society to grow comfortable in its own skin, making the pursuit of a different aesthetic ideal redundant altogether?\*





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